Substitute for Form 1449A/PTO Complete If Known TO BE ASSISTMENT 10/792,36/ **Application Number** INFORMATION DISCLOSURE Filing Date STATEMENT BY APPLICANT First Named Inventor Robert J. Penek, Jr. (Use as many sheets as necessary) Ar Unit To Be Assigned Examiner Name To Be Assigned SHEET 1 of 3 Attorney Docket No. TCO1-102US2

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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.

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